U.S. DEPARTMENT TO ELEMENT TO ELE

U. S. COAST GUARD AUXILIARY

U.S. COAST GUARD CGAUX 4 (6-04)	MEMBER	R TRANSFER REQUEST
WITHIN CURRENT DISTRICT OUTSIDE CURRENT DISTRICT		
THIS FORM MUST BE ACCOMPANIED BY FORM CGAUX-33 CHANGE OF MEMBER INFORMATION		
SECTION 1 - CURRENT INFORMATION		
CURRENT MEMBER NUMI		ANDER
I,LAST NAME	FIRST NAME	MIDDLE INITIAL
DESIRE TO TRANSFER TO FLOTILLA , DISTRICT		
EFFECTIVE		
	DATE	
I HAVE ACCOUNTE	D FOR ALL AUXILIARY AND (COAST GUARD PROPERTY.
MY AUXILIARY ME	MBERSHIP CARD (CG-2650) I	S ATTACHED).
	MEMBER'S SIGNATURE	DATE
TO: DIRECTOR OF	AUXILIARY	
RECOMMEND APPROVAL.		
RECOMM	END DISAPPROVAL. (See at	tachment).
FROM:		
	CURRENT FLOTILLA COMMANDER	DATE
	SECTION 2 - NEW	INFORMATION
TO RECEIVING DIS	TRICT AUXILIARY DIRECTOR	₹
I have transferre	ed the paperwork to your distric	rt.
MEMBER TRA	NSFERRED EFFECTIVE	
DATE		
MEMBER NOT	TRANSFERRED. (Reasons for	or denial are attached.)
D	IRECTOR OF AUXILIARY	DISTRICT DATE
		NEW MEMBER NUMBER
TO RECEIVING FLO	OTILLA COMMANDER	
The above listed	auxiliary member has been tra	ansferred to your flotilla and a new member
number, shown in Section 2, above, has been assigned.		
· · · · · · · · · · · · · · · · · · ·	DIRAUX	<u> </u>
	ign new member number, notif	y member and both FCs.
		s, send personnel record to new DIRAUX.
Transfer effective when	nen request is approved and m	ember accepted by new DIRAUX.

MEMBER TRANSFER REQUEST - CGAUX-4

- A. GENERAL This form is for members in good standing who request transfer to another flotilla, either within or outside the present district.
- B. CHECK APPROPRIATE BOX Check the box which applies to this transfer request.
- C. CURRENT MEMBER NUMBER Enter your current 10 digit Auxiliary member number.
- D. NAME Enter you last name, first name and middle initial as they appear on your Flotilla Roster.
- E. FLOTILLA Enter the 4 digit number of the Flotilla to which you wish to transfer.
- **F. DISTRICT** Enter the 3 element number of the District to which you wish to transfer.
- **G. DATE** Enter the effective date of the requested transfer.
- H. MEMBER'S SIGNATURE Member's signature as normally written.
- **I. DATE -** Enter date signed.
 - **1. ATTACH:** Change of Member Information (CGAUX-33). Auxiliary membership Identification Card (CG-2650).
 - 2. FORWARD: Completed form and all attachments to your present Flotilla Commander.
- J. FLOTILLA COMMANDER Check appropriate box, sign and date. Forward with attachments to DIRAUX.
- **K. DIRAUX -** Check appropriate box, sign and date.
 - 1. Within District Assign new member number, notify member and both Flotilla Commanders.
 - 2. Outside District Remove member from District List, send personnel jacket to new DIRAUX.
 - 3. Transfer effective when approved and member is accepted by the new DIRAUX.

PRIVACY ACT STATEMENT

In accordance with 5 USC 552a(e)(3), the following information is provided to you when supplying personal information to the United States Coast Guard.

- 1. AUTHORITY which authorized the solicitation of information: 14 USC Sec 823.
- 2. **PRINCIPLE PURPOSE(S)** FOR WHICH INFORMATION IS INTENDED TO BE USED: To establish eligibility for enrollment and a record for the individual in the Auxiliary Management Information System.
- **3. THE <u>ROUTINE USES</u>** which may be made of this information: Provide identification, address and personal information to the following: (1) Directors of Auxiliary, (2) Members of the Auxiliary.
- **4. WHETHER OR NOT DISCLOSURE** of such information is mandatory or voluntary (required by law or optional) and the effects on the individual, if any, of not providing all or any part of the requested information: Disclosure of this information is voluntary, but failure to provide information will prevent enrollment of the person in the Auxiliary.